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Bib Data Sheet

CONFIRMATION NO. 7938

SERIAL NUMBER 10/614,714	FILING DATE 07/07/2003 RULE	CLASS 602	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. P06626US0
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APPLICANTS

Steve Sensabaugh, Palm Harbor, FL;

** CONTINUING DATA ***** *None SA*

** FOREIGN APPLICATIONS ***** *None SA*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 10/02/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
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Verified and Acknowledged *Gurmaye Ali* Examiner's Signature *SA* Initials

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TITLE
 Ankle fracture brace with break-away arm

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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